

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 10/070173	FILING DATE
						APPLICANT(S)	
CLAIMS							
AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			
IND.	BBR	IND.	BBR	IND.	BBR	IND.	BBR
1							
2							
3							
4							
5							
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48							
49							
50							
TOTAL IND.	2	↓	2	↓			
TOTAL DEP.	10	↔	11	↔			
TOTAL CLAIMS	12		13				
* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS							